

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		45	1-27-05
FORMALITY REVIEW	DW	72341c	2-21-05
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 - ..... Restricted

BEST AVAILABLE COPY

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	Dec 10 2003
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
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38	✓	✓	
39	✓	✓	
40	✓	✓	
41	✓	✓	
42	N	N	
43	N	N	
44	N	N	
45	N	N	
46	N	N	
47	N	N	
48	N	N	
49	N	N	
50	N	N	

Claim	Final	Original	Date
51	✓	✓	Dec 10 2003
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	✓	
56	✓	✓	
57	✓	✓	
58	N	✓	Dec 10 2003
59	✓	✓	
60	N	✓	Dec 10 2003
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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